UCSF
# Newsbreak

News for the UCSF Campus Community VOL. 13, NO. 5 FEBRUARY 27, 1998

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## Regents approve funds for new cancer center at UCSF Mount Zion

By DALE MARTIN

The University of California Board of Regents approved financing for the construction of a long-awaited clinical cancer center building at the UCSF Mount Zion Medical Center.

The five-story, 88,000-square-foot building will be at the corner of Sutter and Divisadero streets in San Francisco and will house clinical cancer programs of UCSF Mount Zion Medical Center, part of UCSF Stanford Health Care. The new facility will include a state-of-the-art radiation therapy center, a patient-oriented breast care center, mammography, chemotherapy and doctors' offices.

The Regents approved bond financing of $33 million for the UCSF Cancer Center building at their February 19 meeting in San Francisco. The new building has a total project cost of $42.5 million, which includes $10 million to be obtained through private fund raising.

Bond financing for the new UCSF Mount Zion building is part of a $338.4 million capital construction and debt restructuring bond package for UCSF Stanford Health Care. The UC Regents and the Stanford University Board of Trustees each have approved the bond package.

The plan calls for $47 million in bond financing for an ambulatory care center at Stanford that will provide cancer treatment. The total cost of the Stanford project will be $117 million, of which $50 million will come through private fund raising and $20 million from regular capital programs.

The two centers, at UCSF and Stanford, are needed to accommodate growth in cancer care as well as to consolidate clinical services in adjacent space.

"The building of the cancer center, done in parallel with complementary efforts at Stanford, is a major step toward integrating cancer research and the clinical environment," said Frank McCormick, director of the UCSF Cancer Center. "Together, we expect to build a first-class cancer center for Northern California over the next five years."

UCSF Stanford Chief Executive Officer Peter Van Etten also cited the complementary nature of the projects and their shared goal of transforming laboratory discoveries into new treat-

(See **Regents** on page 3)

Artist Jeff George's rendering of the new cancer center being constructed at UCSF Mount Zion

## SFGH sets national model for HIV prevention intervention

By PAULA MURPHY

Post-exposure prevention for HIV infection became a controversial issue last year after UCSF announced it would study the safety and feasibility of offering it to people following high-risk sexual or injection drug use exposure. Before the study, which is being conducted with the San Francisco Department of Public Health, began in January, only health care workers could access such treatment, known as post-exposure prophylaxis (PEP) — counseling, testing and antiviral medication within 72 hours of exposure to HIV. Critics termed this study the "morning after" treatment, saying it would encourage people to take risks and undo the progress made by prevention efforts.

It may be too early to determine the results of offering PEP to the general population — it has not been scientifically proven to prevent infection following sexual exposure to HIV — but its effectiveness is well established among occupationally exposed health care workers. Since the mid-1980s, San Francisco General Hospital has been on the forefront of managing occupational exposure to HIV, and has shown that PEP has an 80 percent effectiveness in preventing infection from developing. In fact, only one in 300 occupational exposures to HIV results in infection.

Julie Gerberding, associate professor of medicine and director of the Epidemiology and Prevention Interventions (EPI) Center at SFGH, has been a leader in protecting health care workers from exposures since the beginning of the AIDS epidemic. She developed the Needlestick Hotline in 1988 to provide immediate treatment to exposed health care workers at SFGH. Last fall she was integral in launching the National Clinician's Post-Exposure Prophylaxis Hotline (PEPLine), which offers the most current information on treatment for occupational exposures. These hotlines have become models by

(See **Gerberding** on page 8)

## Gene discoveries raise hope for spinal cord repair

By JEFFREY NORRIS

Newly reported gene discoveries are leading researchers to a better understanding of the biological ingredients needed for normal nerve growth, and possibly for the rewiring of severed spinal cord nerves.

In animals ranging from tiny roundworms to humans, timely activation or inactivation of these genes in nerve cells results in the formation of normal nerve connections in the spinal cord or in comparable structures in invertebrates, the new findings suggest.

A collaborating team of Howard Hughes Medical Institute (HHMI) researchers at UCSF and UC Berkeley reported the new gene discoveries in two articles in the January 23 issue of Cell and in a third article in the January issue of Neuron.

The genes — found in worms, fruit flies (Drosophila), rats and humans — encode a family of related proteins that mark the extending tips of growing nerve filaments and appear to prevent these nerve filaments from growing into certain areas of the developing embryo.

The researchers' studies of fruit flies and worms indicate that this protein marker is detected by cells that run down the middle of these animals' version of an embryonic spinal cord. Depending on their surroundings, nerve filaments deciding which way to grow may thread their way along adjacent nerve cells, to which they are attracted, or they may follow the less attractive, possibly repellent midline cells. The researchers also found evidence that the protein markers are likewise used in guiding nerve growth around the vertebrate spinal cord.

These new results and other recent findings are leading neurobiologists who study how the nervous system forms to acknowledge the importance not only of growth factors, but also of molecular inhibitors that block nerve growth. At the same time, an improved understanding of how growing nerves are guided raises hope that the biological processes involved may one day be manipulated to direct the re-growth of nerves to repair severed nerve connections following injury, the researchers said.

Growth factors, growth inhibitors and guidance molecules may all be required to obtain useful re-growth of injured nerves in the spinal cord, according to Marc Tessier-Lavigne, HHMI investigator and professor of anatomy at UCSF, and a participant in the research collaboration.

"To obtain repair of severed nerve connections in the spinal cord it will be necessary to block the inhibitory molecules — to inhibit the in-

(See **Spinal Cord** on page 6)

## Employees to be honored at Founders Day luncheon

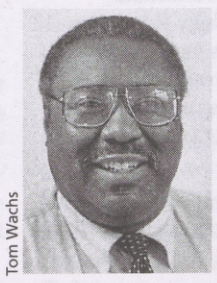
During the second week of March, the campus will celebrate Founders Day with events that celebrate the history and traditions of UCSF.

The campus will also pay tribute to some of its current heroes with awards for dedicated service. This year's Chancellor's Award for Public Service will be presented to three UCSF campus members at the Awards Luncheon, held Monday, March 9 at Steninger Gymnasium, Millbery Union (admission by invitation only).

Chris T. Anderson

Miramontes

Helen Miramontes, associate clinical professor in the department of community services, School of Nursing, will be recognized for more than 50 years of political activism and leadership. Miramontes, also the recipient of the Edison T. Uno Award, began her political activism with involvement in the peace and civil rights movements in the '50s and '60s. When the AIDS epidemic emerged in the early '80s, Miramontes, working as a staff nurse, was enraged by the discrimination inflicted on sufferers of the disease. She embarked on what has become nearly 20 years as an HIV/AIDS educator and activist. Beginning at the local level, training health care providers where she worked, Miramontes later formed many county-level support groups and task forces. While serving as president of the California Nurses Association in the mid-'80s, Miramontes used her position to counter the hysteria among health care workers and governmental officials at the time. Her work now is national in scope.



Tom Wachs

King

She has developed a curriculum for training nurses in care of HIV/AIDS patients that has become a national model. She was appointed by President Clinton to serve on his Advisory Council on HIV/AIDS and she is known as the national spokesperson for parents of children with HIV/AIDS.

Leon King, director of nutrition and dietetics for UCSF Stanford Health Care, is a recipient of both the Chancellor's Award for Public Service and the Thomas A. Burbridge Award. King founded Back on Track in 1988 when he recognized a crisis facing high-risk students. Through the San Francisco Third Baptist Church and

(See **Founders Day** on page 7)

## Smith-McCune upholds Kerner's legacy

by ABBY SINNOTT

Karen Smith-McCune, UCSF assistant professor of obstetrics, gynecology and reproductive sciences, has been appointed to the Kerner Endowed Chair.

The position, which focuses on cancer research and patient care pertaining to women, honors John A. Kerner, a distinguished leader of the San Francisco medical community and former chief of obstetrics, gynecology and reproductive sciences at Mount Zion Medical Center.

"We are pleased to establish this endowed chair recognizing the outstanding achievements of Dr. Kerner," said A. Eugene Washington, professor and chair of the UCSF department of ob/gyn. "In Dr. Smith-McCune, we have a physician-scientist who exemplifies the sterling qualities and commitment to the excellence for which Kerner is known."

During the last 40-plus years in private practice, Kerner has developed a loyal following of grateful patients. Together with his colleagues and family members, he donated money to the John A. Kerner Fund at Mount Zion which helped to support the Kerner professorship. Although it was established eight years ago, Smith-McCune is the first individual to receive the appointment.

"Karen has already done outstanding work in relation to cancer of the cervix in women," said Kerner. "She is particularly unusual because she is one of those rare individuals who can function in a clinical setting while pursuing outstanding studies as a scientist."

Smith-McCune has been the director of the UCSF Dysplasia Clinic since July 1991 as well as a leading women's health researcher.

"My mission is to describe potential markers of cervical cancer and its precursors, which will lead to the development of improved treatment and diagnosis," Smith-McCune said. "My work is very synergetic with Dr. Kerner's and builds upon the foundation he laid with Pap smears."

During Kerner's residency studies at UCSF, which he completed in 1949, he worked with Herbert F. Traut, then the chair of the obstetrics and gynecology department. Traut helped to develop the Pap smear, a test widely used to detect cancer of the cervix.

Along with Traut, Kerner was instrumental in disseminating the Pap smear into the community, which drastically reduced the instances of cervical cancer among women, said Smith-McCune. "I want to extend Kerner's work on a molecular basis and continue to specifically identify potential markers for diagnosis."

Through their work as teachers, researchers and physicians, both Smith-McCune and Kerner are dedicated to developing and delivering advanced health care to women. Kerner notes that Smith-McCune is remarkable because her research is designed to improve health care for women on an international level.

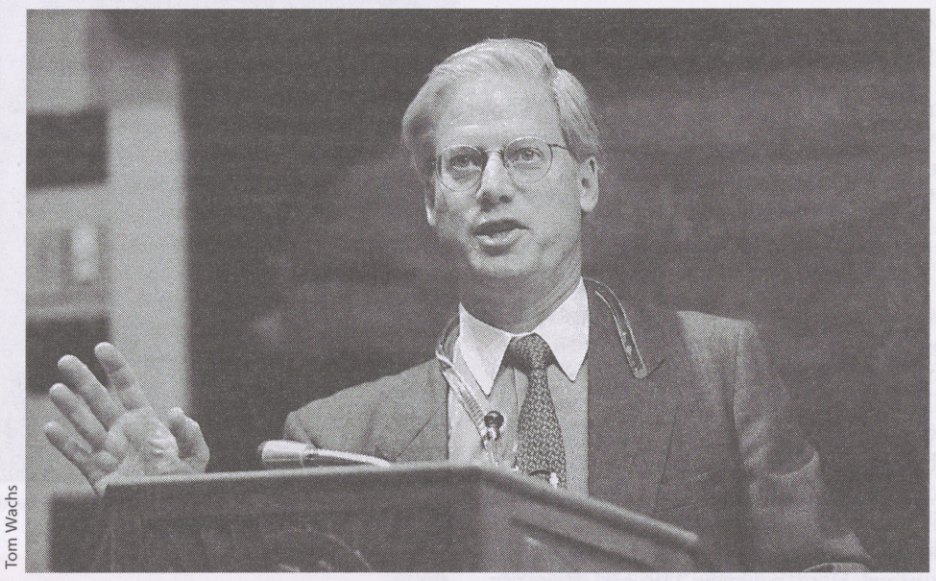
In addition to being published in numerous scientific journals and contributing to the book Handbook of Gynecology and Obstetrics (1993), Smith-McCune is also a member of the American College of Obstetrics and Gynecology, American Society of Colposcopy and Cervical Pathology, and Women in Cancer Research. She also serves on the UCSF Reproductive Endocrinology Center's steering committee, which aims to strengthen the expertise and research in women's health.

Smith-McCune graduated with a BS in honors biochemistry from McGill University in 1975 and attended the University of Cambridge, where she received a history and philosophy of science diploma in 1976. In 1981, she completed a PhD program at Rockefeller University and in 1986 received her medical degree from Stanford University.

She completed her ob/gyn residency at UCSF in 1990, followed by a postdoctoral fellowship with J. Michael Bishop, recently named chancellor of UCSF, and a professor of microbiology and immunology and the director of the GW Hooper Foundation.

Outside of the UCSF medical community, Smith-McCune is a strong supporter of public education in the Bay Area. She is a member of the Board of Directors of the San Francisco Education Fund, an organization which promotes innovations in public school classrooms by granting awards to outstanding teachers.

Smith-McCune lives in San Francisco with her husband and two young children.



Tom Wachs

## Magowan hits home with ABOG lecture

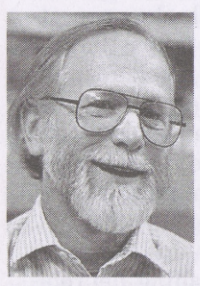
Peter Magowan, president and managing general partner of the San Francisco Giants, presented Spring Training for the Management Team at Toland Hall on February 19. Magowan is recognized as one of Major League Baseball's most progressive leaders and is credited with playing a critical role in keeping the Giants in San Francisco.

The lecture was sponsored by the Academic Business Officers Group (ABOG).

## Appointments

**Michael Banda**, professor in residence, and **Robert Obana**, Assistant Vice Chancellor, Budget & Finance: Appointed co-directors of the UCSF Research Administration Project (RAP), the campus' major overhaul of all research administration procedures. Banda's credentials as a faculty member and Assistant Vice Chancellor Obana's experience in campus administration will bring a breadth of vision and a wealth of valuable expertise to the project. "These appointments assure continuing, strong leadership for RAP upon the retirement of Associate Vice Chancellor Karl Hittleman, the project's initiator and previous director," said Dorothy Bainton, vice chancellor, academic affairs.

The rapid succession of Banda and Obana into the co-directorship also serves to emphasize that RAP remains a very high campus priority.



Bishop

**J. Michael Bishop**, professor of microbiology and immunology: Appointed chair of the National Cancer Advisory Board. Recently named as the next chancellor of UCSF, Bishop received the Nobel Prize in Physiology and Medicine for his work on tumor viruses and oncogenes. Bishop's expertise is in the area of microbiology, molecular biology and biology of tumors. He has served on numerous committees and boards including various editorial boards for scientific publications. Bishop has been a member of the National Cancer Advisory Board since 1994. He received a BA from Gettysburg College and an MD from Harvard University.

The National Cancer Advisory Board is composed of eighteen members appointed by the president for terms of six years.

**Karen Butter**: Appointed Acting University Librarian. Butter has been with the UCSF Library since 1992. As Deputy Director of Information Resources and Services she has had responsibility for library operations, development of the collections, informatics education and training, support for instructional courseware development, and digital library operations. As Acting Librarian she will have full responsibility for the administration of the resources, budget, program and planning for the library. Former University librarian and Assistant Vice Chancellor Richard Lucier is now at the Office of the President as executive director of the University of California Digital Library.

**David J. Sanchez**, Assistant Vice Chancellor of Academic Affairs: Appointed vice president of the San Francisco Health Commission. Sanchez is a faculty associate for Academic and Student Outreach and professor in the department of family and community medicine. His research on access to and delivery of health care among urban minority populations, as well as intervention strategies to ensure access to quality health care, has resulted in numerous publications. He has been a member of the Institute of Medicine's Primary Care Committee and a special consultant to the Assistant Secretary of Health, Education and Welfare. He has served on the National Commission of Health and Vital Statistics and was a participant in the panel Delivery of Health Care, the White House Conference on Children. He recently completed his appointment to the National Academy of Sciences Institute of Medicine's Committee on increasing minority participation in the health professions.

**Enrique Terrazas**, informatics fellow at UCSF, department of laboratory medicine: Appointed to the College of American Pathologists' (CAP) Technology Education Committee. He received his medical degree from UCSF and his undergraduate degree from UC Berkeley. Terrazas resides in Oakland and is the father of two children, Araceli and Selina.

The College of American Pathologists (CAP) is a medical society serving more than 15,500 physician members and the laboratory community throughout the world. It is the world's largest association composed exclusively of pathologists and is widely considered the leader in laboratory quality assurance. The CAP is an advocate for high-quality and cost-effective patient care.

## Honors and Awards

**Stephen Batki**, clinical professor at SFGH and director, Division of Substance Abuse and Addiction Medicine: Received a one-year contract totaling $294,000 from the Schering Plough Research Institute to study the efficacy of a medicine shown to be safe in human phase 1 testing for the treatment of cocaine dependence. Batki's site is one of 19 stimulant treatment research groups nationwide chosen to participate in this multicenter trial.

## Private Support

UCSF is pleased to acknowledge the following gifts/pledges of $25,000 or more from individuals, corporations and foundations received February 1-14, 1998.

**$250,000 - $499,999**

The Eugene Garfield Foundation

**$100,000 - $249,999**

Glaxo Wellcome Inc.
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## Corrections Feb. 13

The photo of J. Michael Bishop and Steve Barclay on page 1 was taken by Tom Wachs. The photo of Haile T. Debas on page 8 was taken by Chris T. Anderson.

The final paragraph of the Founders Day preview on page 3 should have read: "For information and to purchase tickets, call 476-4454. The Founders Day Awards Luncheon will be held March 9, and will honor outstanding UCSF staff and faculty members. This event is by invitation only."

## Subscribe to the Daybreak Listserv

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**Deadline** for the next issue, to cover March 14-27, 1998, will be on **Friday, March 6.** Please fax news to Newsbreak at 476-3541 or mail to Box 0462 and calendar items to Nancy Heller at 476-8810 (nheller@itsa.ucsf. edu), all at Box 0462. Fax last-minute copy to 476-3541. For address and distribution changes, call C.J. Burleson at 476-6791.

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# $400,000 Grant to fund development of minority scientists

by PAULA MURPHY

Despite steady gains made by minorities, and by women, in the academic sciences in recent years, the proportion of all science degrees held by minorities remains relatively low. And certain minority groups, known at UCSF as underrepresented minorities, remain conspicuously absent from the ranks of the nation's PhDs and professors.

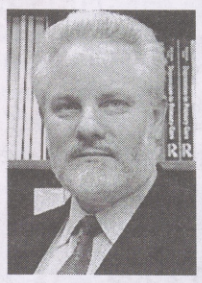
UCSF's Graduate Division recently received funding to offset this discrepancy. The four-year, $400,000-per-year Initiative for Minority Student Development grant, given by the National Institute of General Medical Science (NIGMS), will be used to support a total of 20 underrepresented minority students each year, including students in their second, third, fourth and fifth year of study, and will provide foundational support for a co-curriculum of student enrichment, which will be available to all graduate academic students.

Dean Clifford Attkisson said he was "thrilled" that the Graduate Division, with almost 11 percent of its student body coming from underrepresented minority populations, received this federal grant. "The prime goal from the NIH's point of view is the development of minority scientists," he said. "That's also our goal."

In the post-209 and SP-1 era, the grant allows UCSF to continue to compete with top institutions for outstanding students and to meet the campus goal of a diverse student body, Attkisson said. Currently, students from non-European, non-Anglo populations make up 36 percent of the graduate division.

"Given everything else that this campus has to offer, in terms of the world-class graduate programs, it will make this campus a very attractive setting for minority students to apply," Attkisson said. "The best will apply and the best will have a very high likelihood of being accepted because the faculty aspire to work with the most outstanding students." The grant not only will fund direct stipend support for 20 students each year, including tuition and fees, but also will include funds for student travel to conferences, professional meetings and participation in intensive research programs outside of UCSF, for example at Cold Springs Harbor, a national biological laboratory on Long Island, or on the NIH campus in Bethesda.

Attkisson said he hopes the ranks of underrepresented minorities — African-American, American-Indian, Puerto Rican, Filipino and Mexican-American —in the Graduate Division will continue to grow at least at the one percent pace of the past six years. He credits the campus' outreach efforts with the growth and believes in fostering diversity in the context of equal opportunity for all.


Attkisson

"It's this growth, of course, that we're trying to stimulate and maintain," Attkisson said. "That was our primary goal, but to do it in a way that increases the opportunities for support for all students and does not select individual students for preferential treatment."

Attkisson said one clear reason for the federal grant is the fact that minorities win only a small percentage of the coveted Individual Investigator, or RO1, grants. "I think the most compelling reason for me is that there's a lot of talent that doesn't get acknowledged and expressed and included in the process," he said. "For me, there are very important steps we must take to ensure that really creative and talented people get an opportunity to show what they can do."

Minority students will receive $250,000 of the grant money, with the remainder going to the co-curriculum. "These 20 students, as they go along, will be like all the other students except their core support will come from this grant for four years," Attkisson said. "That's why it's so important to the campus that we have a quarter-million dollars of additional new support for our students, which will help us to fund all students because our enrollment growth is nominal. What is growing is our ability to support the existing students better."

Presently, the co-curriculum of student enhancement programs, which already exists at UCSF but is not funded, is done out of the "good will and initiative" of the faculty, students and postdocs, Attkisson said. It includes courses on grant writing, interviewing for jobs, writing curriculum vitae, scientific writing and administering a laboratory. Attkisson says he has no intention of changing the existing curriculum, which was designed and implemented by the faculty, but will now be able to financially support it.

"I really want to build on the enthusiasm and the initiative that's already out there by offering foundational support to let faculty do their thing and harness the energy of our staff to do new things," he said.

And the Graduate Division's efforts to produce more minority scientists did not start, nor does it end, with the grant. For the past 11 years, the division has run a summer research training program for minority college students, funded mainly by a grant from the National Institute of Mental Health Minority Research Resources Branch. Eighty percent of the 300 students who have participated in that program have gone on to doctoral study, either in graduate academic or graduate professional areas.

However, Attkisson still sees plenty of room for growth, in terms of outreach and recruitment. "There's a lot more we can do on the campus," he said. "We can be more efficient, we can be more collaborative and I think the campus wants to, and is able to, invest more in outreach, especially informational outreach to all segments of the population."

# 'Smart bomb' therapy targets breast cancer cells

by DALE MARTIN

UCSF researchers have received approval from the National Cancer Institute (NCI) to develop a less toxic breast cancer therapy that may also prove to be more efficient at directly targeting cancer cells.

The UCSF team has found a way to combine liposomes — small, synthetic particles that are used to carry potent anti-cancer drugs — with antibodies that can recognize and bind to cancer cells.

The combination of the two — called immunoliposomes — have been compared to the Gulf War's "smart bombs" in their ability to selectively target and kill cancer cells, while avoiding normal cells.

"We have completed 'proof of concept' studies and have shown that this cures tumors in mice," said John Park, UCSF assistant adjunct professor of medicine.

The NCI approval indicates a commitment by the government agency to sponsor the anti-cancer treatment for further development directed toward clinical trials, which may start within a year.

One of the major problems with standard chemotherapy drugs is they kill both cancer and normal cells, resulting in harmful and often debilitating side effects to patients.

By putting chemotherapy in liposomes and adding the targeting capability of a specially developed antibody, the drugs go directly to the cancer cells without causing more toxic side effects.

"The antibodies bind to the cancer cell, enter it and release the drugs inside," Park said.

Liposomes themselves were recently approved by the federal Food and Drug Administration for delivering drugs to patients with Kaposi's sarcoma, an AIDS-related skin cancer. They are also being evaluated in clinical trials in breast cancer. The addition of an antibody to liposomes represents a potential improvement upon liposome technology, according to the UCSF team. The researchers have found that immunoliposomes — rather than liposomes — efficiently find and enter cancer cells, increasing their effectiveness.

The antibody on these liposomes recognizes the HER2/neu (erB2) protein on cancer cells. HER2/neu is a cancer protein frequently found on breast cancer cells in overabundance. The new UCSF research makes use of the anti-HER2/neu antibody developed by the biotechnology firm Genentech Inc. of South San Francisco. UCSF, as well as other institutions, is already conducting Phase III clinical trials on the HER2/neu antibody. The immunoliposomes tested at UCSF have included both the Genentech antibody and a new antibody called scFv C6.5, which was developed by James Marks, associate professor of anesthesia and pharmaceutical chemistry at UCSF. The UCSF and NCI collaboration will produce immunoliposomes containing scFv C6.5.

But the incorporation of antibodies like this with liposomes may potentially offer an improvement, according to Park.

"We're not just targeting the protein, but bringing a payload of chemotherapy to the cancer cells," Park said. The payload is the standard chemotherapy drug, doxorubicin.

The research is under the sponsorship of the NCI-sponsored Breast Cancer Specialized Programs of Research Excellence (SPORE) Program. The UCSF SPORE program is one of 15 nationwide that receives special funds from the National Cancer Institute to more quickly bring research from the laboratory to clinical study. Funding for the project comes from SPORE, the US Department of Defense and the American Society of Clinical Oncology.

The NCI Decision Network is a separate program which provides NCI assistance in the further development and clinical testing of promising anticancer agents first developed by government, industry or academic scientists. Under the December approval given by the NCI Decision Network, NCI resources will be allocated to studying and optimizing immunolipo-

(See **Therapy** on page 6)

# New electricity contract with Enron results from soon-to-be-deregulated energy market

By Claire M. Anselmo

The advent of energy deregulation in California has led the University of California and the California State University to a new contract with Enron Energy Services of Houston, Texas, and an expected savings of $15.7 million for both institutions over the next four years, effective March 31.

The contract, which provides electricity to all nine UC campuses and all 22 CSU campuses at a 5 percent discount off the PG&E rates, will result in an estimated savings of $3.9 million per year for both systems, or $15.7 million for the 4-year period of the contract. For UCSF, the new rates translate into a savings of $160,000 per year, and $640,000 during the total contract period.

However, UCSF Facilities Management still points to the need for campuswide conservation.

"This new contract will save money, but it's not going to save energy," said Dave Bohler, manager, Utilities Division Technical Engineering Support, for Facilities Management.

Bohler, whose group leads the UCSF Water and Energy Awareness Program, says the campus should still be vigilant toward conserving water and energy simply to keep UCSF running as efficiently as possible.

While saving money has been one goal of the Water and Energy Awareness Program, another paramount objective has been to achieve the industry-termed "avoided cost" — that is, trying to keep energy usage from growing through conservation, while recognizing that the campus energy needs are actually growing each year, due to more air conditioning, more equipment purchased, and other similar reasons.

"Conservation efforts and other energy projects undertaken by Facilities Management over the past three years have resulted in avoided costs of more than 1 million annual kilowatt hours at a savings of about $100,000 per year," Bohler said. "Even with the monetary savings achieved through this new contract, UCSF staff and students should continue to do whatever they can do to help keep down energy and water waste."

UCSF typically has used about 7 million kilowatt hours per month at the Parnassus campus. This energy costs UCSF about $500,000 each month as payments to PG&E. With the new Co-generation Power plant coming on line, this usage will reduce to about 2 million kilowatt hours per month, with the new plant generating the difference for the campus. Even with this reduced energy usage procurement, the new contract will still save UCSF more than $13,000 per month on electricity.

Enron will support university strategic energy savings plans, annual energy workshops, yearly awards for successful energy management programs, and a scholarship program for students pursuing education in the energy field.

## Regents (from page 1)

"The plans build on the collective strengths of the two institutions and are in keeping with the mission of UCSF Stanford Health Care to provide cutting-edge treatment capabilities and to improve and innovate in the area of patient care," Van Etten said.

Long known as a major center for basic cancer research, UCSF is working to enhance clinical research by arranging to provide access to both clinical care and trials under one roof. UCSF opened its new cancer research building in 1997 and is continuing to recruit nationally recognized cancer researchers for the facility. The goal is to become the first National Cancer Institute (NCI)–designated comprehensive cancer center in Northern California. Such a designation would allow the center to receive more grants and conduct more clinical trials to serve patients in Northern California. UCSF expects to apply for the designation this year.

"With this new project, we will be able to offer interdisciplinary care that is unique in the Bay Area. We are bringing together the scientific community with clinicians to provide the most up-to-date clinical protocols for people in Northern California," said Bruce Schroffel, chief operating officer of the UCSF Medical Center.

Groundbreaking for the new building will take place by June 1 and construction should be completed by the end of 1999, he said.

"It should be an elegant building," Schroffel said, noting that planners are studying a proposal for a two-story atrium that will be the focal point of the entry and also will function as a new entry for the entire UCSF Mount Zion Medical Center.

# Feb. 27-March 13, 1998

## 27 Friday

**SURGERY RESIDENT RESEARCH DAY:** David Dunn, Jay Phillips professor and chairman of surgery, University of Minnesota, presents *Characterization of the Host Septic Response: Mythologies and Reality*, 8 a.m.-4 p.m., N 217. Dunn will be the 11th Annual J. Englebert Dunphy Visiting Professor for the UCSF Department of Surgery Resident Research Day. For more information, call Eleanor Levaeu at 476-0972.

**ON-SITE TRAINING AND VENDOR FAIR:** Brown & Toland presents a day of on-site training programs including *Learning to Capture Your Practice's Financial Picture,* at the Miyako Hotel, 8 a.m.-4 p.m. A vendor fair offers the opportunity to meet suppliers of medical supplies, transcription services, pharmaceuticals and more. Breakfast and lunch served. $50; call Maria Caldecott at 749-5413.

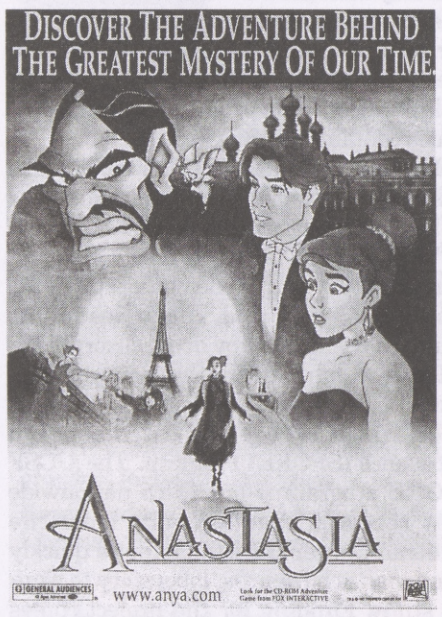
**WELLNESS LECTURE:** Elson Haas presents *Detoxification and Natural Therapies in Medical Practice*, noon, HSW 300. Hear how incorporating therapeutic diets and the use of nutrients and herbal remedies is effective, safe and cost efficient in the treatment of many common medical maladies and the improvement of health. Sponsored by the Institute of Healing Arts & Sciences. Free. Call 584-4416.

**COLE HALL CINEMA:** Millberry Programs & Services presents *Boogie Nights*, 5:45 & 7:45 p.m., Cole Hall. Rated R. Tickets can be purchased at the door only. Box office opens 1/2 hour before showtime. One discounted ticket per ID only. Cost $2 child (14 & under); $2.50 UCSF students/MU members; $3 UCSF staff/other students; $3.50 general public. Call 476-6932.

## 28 Saturday

**PSYCHIATRY SYMPOSIUM:** Mardi Horowitz presents Formulation as a *Basis for Planning Psychotherapy*, 10 a.m.-5 p.m., LPPI Auditorium. This course teaches systematic case formulation for psychotherapy. The method of formulation selects targets for attention and psychotherapy techniques. Based on empirical studies, this method utilizes states of mind, defensive control processes and person schemas theories. It is called configurational analysis and it integrates cognitive and psychodynamic approaches. Attendees will receive a text to follow after the day of initial work. This course is open to all mental health professionals engaged in the licensed practice of psychotherapy. Cost $175; reduced fee for residents $100; fee for people who already have the text book $150.

**BLACK CAUCUS DINNER & DANCE:** An evening of dinner and dancing at the annual UCSF Black Caucus Gala VII, 7:30 p.m.-1 a.m., at the Marriott Hotel, Burlingame. Tickets are $50 and will not be sold at the door. Contact Jeanette Howard for tickets at 476-1461.




## 2 Monday

**OUTCOMES RESEARCH SEMINAR:** The Institute of Health Policy Studies presents *Health Care Quality and Outcomes: Research and Application*, 1:45-3:30 p.m., 1388 Sutter St., 11th Floor, Seminar Room. Speakers Tom Newman, Robert Miller, Harold Luft and Jon Showstack will be discussing secondary data. To RSVP call 476-4924.

**CHILDBIRTH PREP CLASS:** UCSF Stanford Health Care is sponsoring a class on *Childbirth Preparation: Integrated Methods*, 6:30-9 p.m., ACC, 400 Parnassus Ave. This is a four-week series on stages and process of labor, breathing and relaxation techniques, support, medication options, variations in labor, including cesarean birth, and immediate postpartum for mother and baby. Classes will be held 3/2, 3/9, 3/16 and 3/23. Fee is $130 per series. Call 476-0668.

## 3 Tuesday

**MOBILE MAMMOGRAPHY:** The UCSF van offers convenient breast cancer screening, 9 a.m.-3 p.m., UCSF/Laurel Heights, 3333 California St. parking lot. The exam costs $75 and takes about 20 minutes. Written or verbal approval from a doctor is required. Call 476-2193 for an appointment and for other dates and locations.

**MEDITATION CLASSES:** Conducted by Brahma Kumaris Meditation Center and sponsored by the Institute of Healing Arts and Sciences, noon-1 p.m., S 158. Free. Call 563-4459.

## 4 Wednesday

**BROWN BAG LECTURE:** Laurel Mellin, associate clinical professor of family and community medicine and pediatrics at UCSF and author of *The Solution*, presents The Solution, 12:10 p.m., HSW 300. Find out the simple way to turn off the drive to overeat without diets or drugs. Free. Sponsored by Public Services Programs. Call 476-4394.

## 5 Thursday

**SEXUAL HARASSMENT PREVENTION SEMINAR:** The Office of Sexual Harassment Prevention & Resolution will be conducting a management briefing on sexual harassment prevention and resolution in the workplace, 10 a.m.-noon, C 254. This session is offered especially for new managers and supervisors who have questions about their responsibilities in the areas of sexual harassment prevention and resolution. Managers/supervisors who have attended previous sessions and would like an update on current trends, developments and implementations are also welcome to attend. RSVP to Sandy Menefee at menefee@itsa.ucsf.edu, or by calling 476-5186.

**ENRICHMENT WORKSHOP:** Michael Alvarez, UCSF career center, presents *Careers: Is the Skill You Are Learning Today Leading to a Job Tomorrow?*, noon, N 217 and repeated, 5:30 p.m., HSW 302. This presentation will give critical and up-to-date information on trends, hiring priorities and job-seeking strategies that produce results. Panel to include executives, recruiters and human resources personnel from area companies. Free. Sponsored by Student Enrichment and Activities. Call 502-2442.

**COLE HALL CINEMA:** Millberry Programs & Services presents *Eve's Bayou*, 5:45 & 7:45 p.m., Cole Hall. Rated R. Tickets can be purchased at the door only. Box office opens 1/2 hour before showtime. One discounted ticket per ID only. Cost $2 child (14 & under); $2.50 UCSF students/MU members; $3 UCSF staff/other students; $3.50 general public. Call 476-6932.

## 6 Friday

**MOBILE MAMMOGRAPHY:** See 3/3 listing. Location is UCSF/ Parnassus, in front of the Library.

**WELLNESS LECTURE:** Ellen Cutler, chiropractor, presents *Winning the War Against Asthma and Allergies*, noon, HSW 300. Cutler will present the technique NAET, a multi-disciplinary approach consisting of chiropractic, acupuncture, kinesiology and acupressure to eliminate allergies and asthma permanently. Sponsored by the Institute of Healing Arts & Sciences. Free. Call 584-4416.

**BREASTFEEDING:** UCSF Stanford Health Care is sponsoring a class on breastfeeding, 1:30-4 p.m., ACC, 400 Parnassus Ave. Learn how the breast works, milk production, let-down, latch-on, positioning, problem solving, pumping, milk storage, etc. Cost $20 for one parent; $25 for two. Call 476-0668.

**COLE HALL CINEMA:** See 3/5 listing. Showtimes are 6:30 & 8:30 p.m.

# UPCOMING EVENTS

### Art Show & Tour

The Hospital Auxiliary of the Medical Center presents An Opening Night Art Show & Tour, the evening of March 15. Enjoy cocktails and hors d'oeuvres at a private showing of art and sculpture in the beautiful new offices of Kai Yee Woo & Associates. Featured will be fine watercolor reproductions of Russian architect/artist, Alexander Usivitsky and sculpture by internationally renowned artist Aris Lee. A tour of selected showrooms in the Design Center Showplace will be guided by Kai Yee Woo. Sales of art will benefit the Hospital Auxiliary. Cost is $50/guest. Attendance is limited. For more information and time of event, call 476-4906.

### Women's Health 2000

UCSF hosts Gaining Knowledge and Understanding for Women's Health and Wellness, March 21, 8 a.m.-4:30 p.m., 513 Parnassus. This all-day symposium is geared for women of all ages. Over 25 topics will be discussed, including menopause, breast cancer, fertility and stress management. Sponsored by the UCSF department of obstetrics and gynecology and the UCSF National Center for Excellence in Women's Health. Cost $4 adults; $5 teens; $30 seniors. Call 675-0177 for more information and a free brochure.

### Cancer Center symposium

Leading breast cancer researchers will participate in the UCSF Cancer Center's second annual symposium on Thursday, April 30. Scientists from UCSF, Harvard Medical School, Massachusetts General Hospital, Memorial Sloan-Kettering Cancer Center and the National Cancer Institute will make presentations on breast cancer epidemiology, the cancer risks associated with the BRCA 1 and 2 genes, cancer genetics, signaling in breast cancer biology, multifactorial carcinogenesis in breast cancer, breast cancer imaging technology and shared decision making in breast cancer. The full-day program will be held at Cole Hall.

## 9 Monday

**FOUNDERS DAY LUNCHEON:** The awards luncheon will be held at noon, MU Gymnasium. Luncheon is by invitation only. Should you have questions, contact the Chancellor's Office at 476-2401.

**OUTCOMES RESEARCH SEMINAR:** Patricia Katz, Institute of Health Policy Studies presents *Health Care Quality and Outcomes: Research and Application*, 1:45-3:30 p.m., 1388 Sutter St., 11th Floor, Seminar Room. Speaker Joseph Catania will discuss primary data. To RSVP call 476-4924.

## 10 Tuesday

**TAY-SACHS SCREENING CLINIC FOR PREGNANT COUPLES;** 9 a.m., UCSF. Call 476-4080 for an appointment.

**LECTURE ON RELATIONSHIPS:** Sobonfu Some, spokeswoman, Dagara Tribe of Burkina Faso, West Africa, presents *The Spirit of Intimacy: Ancient Teachings in the Way of Relationships*, noon-1 p.m., S 214 Some examines the foundations of healthy, intimate relationships from an indigenous perspective. With insight and compassion, she weaves the connections among sensuality, spirituality and indigenous ways of resolving conflict. Using ritual as a basis, she describes the ways in which every aspect of life is inseparable from spirit, community and what we might call magic. Free. Sponsored by the Women's Resource Center and Rape Prevention Education Program. Call 476-5222 or visit their website at http://itsa.ucsf.edu/~wrc.

**MEDITATION CLASSES:** Conducted by Brahma Kumaris Meditation Center and sponsored by the Institute of Healing Arts and Sciences, noon-1 p.m., S 158. Free. Call 563-4459.

**FOUNDERS DAY LECTURE:** The Faculty Research Lecture will be held at 1 p.m., Cole Hall.

**FOUNDERS DAY BANQUET:** The Founders Day Banquet will be held at the Ritz Carlton Hotel, beginning at 6:30 p.m. with a reception, followed by dinner at 7:15 p.m.

**BREASTFEEDING:** See 3/10 listing. Class time is 6:30-9 p.m.

## 11 Wednesday

**CHANCELLOR'S ADVANCEMENT OF WOMEN AWARDS CEREMONY:** Chancellor Haile T. Debas will present awards to four members of the UCSF campus community in recognition of their contributions to the advancement of women and/or work to increase knowledge of women's health. The ceremony will be held at noon in Toland Hall.

**BROWN BAG LECTURE:** Nancy L. Ascher, UCSF professor and vice chair of surgery and chief of transplant services at UCSF Stanford Health Care, presents *A Woman's Work Is Never Done*, 12:10 p.m., HSW 300. Enjoy a program honoring wonderful women of UCSF and a day in the life of a transplant surgeon. Free. Sponsored by Public Services Programs. Call 476-4394.

## 12 Thursday

**WOMEN LEADERS SYMPOSIUM:** Refer to story on p. 1 for information.

**ANNUAL BOOK SALE:** UCSF Bookstore will be holding its annual Book Sale March 12th -14th, 1998. Faculty and staff are encouraged to take advantage of the 20 percent discount offered by the health science publishers participating in this promotional event. The special discount pricing applies to reference books and health science software. Participating publishers are: Academic Press, Appleton & Lange, Blackwell Science, Churchill Livingstone, Lippincott-Raven, Mosby, Springer-Verlag, Thieme, W.B. Saunders and Williams & Wilkins. In conjunction with the UCSF Bookstore Book Sale, participating publisher representatives will be on hand to answer questions Friday, March 13th at the UCSF Bookstore Book Fair at Saunder's Court from 9 a.m. to 5 p.m.

**MOBILE MAMMOGRAPHY:** See 3/3 listing. Location is UCSF/Daly City, 333 Gellert Blvd.

**ENRICHMENT WORKSHOP:** Lynn Schroeder and Katherine Straznickas, clinical staff, Stanford Health Services, present *Is Stress Just Another 6 -Letter Word? or When Was the Last Time You Had a Break?*, noon, N 217. This workshop will dispel the myth that stress-related illness happens to someone else and give concrete ideas for self-care for now since "later" never comes. Free. Sponsored by Student Enrichment and Activities. Call 502-2442.

**COLE HALL CINEMA:** Millberry Programs & Services presents *Anastasia*, 5:45 & 7:45 p.m., Cole Hall. Rated G. Tickets can be purchased at the door only. Box office opens 1/2 hour before showtime. One discounted ticket per ID only. Cost $2 child (14 & under); $2.50 UCSF students/MU members; $3 UCSF staff/other students; $3.50 general public. Call 476-6932.

**CHILDBIRTH PREP CLASS:** See 3/2 listing. This class will be held 3/12, 3/19 and 3/26.

## 13 Friday

**MOBILE MAMMOGRAPHY:** See 3/12 listing. Location is UCSF/Lakeshore Plaza, 1501 Sloat Blvd.

**COLE HALL CINEMA:** See 3/12 listing. Showtimes are 6:30 & 8:30 p.m.

# New center urges collaborative approach to boost primary care

By ANDY EVANGELISTA

Health care reform during the early part of this decade boosted primary care to the top of the priority list of academic health centers, which traditionally had paid more attention to and spent more resources on specialists.

In many parts of the country, including California, schools have been mandated to increase training of primary care practitioners.

A new UCSF center has been established, however, to make sure that this is much more than a numbers issue and that practitioners on the patient care frontlines in this new era have the proper setting and tools to deliver the best possible care.

The UCSF Center for Collaborative Innovation in Primary Care (CCIPC), which began last fall, is the campus' focal point for advancing primary health care education, research and practice. And to do so, it is teaming faculty in the four UCSF schools, hoping that they can pool their experience and creativity to expand primary care beyond its traditional boundaries. While UCSF practitioners in training will see the first results, the ultimate beneficiaries will be the people in the community who will receive innovative primary and preventive care.

"This campus has a wealth of expertise," said Diana Taylor, associate professor of family health nursing and co-director of the new center. "A goal of the center is to nurture interdisciplinary activities." She noted that the School of Dentistry, with its successful neighborhood clinics, is well-established in community-based care. In the School of Nursing, 70 percent of its training programs are geared to primary care. School of Pharmacy faculty already play a key role consulting with clinicians about drug therapies and educating community patients. The School of Medicine, which placed fourth in primary care in this year's *U.S. News and World Report*'s medical school rankings, also has technology and policy experts who can team with those who provide the hands-on care.

"Preventive medicine is the heart of primary care," said Stephen McPhee, a professor in the division of general internal medicine who co-directs the CCIPC with Taylor. "We want to take prevention up a notch."

CCIPC's roots go back to the fall of 1995, when former chancellor Joseph Martin appointed a group of faculty and administrators from the four schools to explore ways to increase the campus' efforts in preparing its graduates for primary care. A committee — headed by Catherine Gilliss, chair of the department of family health care nursing, and Lee Goldman, chair of the department of medicine — recommended that the campus develop an interschool primary care agenda, create the new center, and contribute pertinent findings from research and clinical trials to help guide primary care delivery and education. Last year, Martin committed five years of funding for the CCIPC and appointed Taylor and McPhee to direct its efforts. A steering committee of faculty from all UCSF schools is forming to set goals and plan strategy.

The center already has linked faculty from different schools for two projects. Family health care faculty in nursing and medicine are proposing to pilot a program to provide group medical visits and comprehensive wellness services to low-income women in San Francisco. The program would combine the expertise of the physicians, who staff the medical visits, with nursing faculty who have developed women's wellness and symptom management approaches.

Another program would have medicine and nursing faculty provide comprehensive care and family caregiver support for seriously ill outpatients with cancer, congestive heart failure and chronic obstructive lung disease who are "at the intersection of curative and comfort care." The research proposal, which is designed to improve the care of patients nearing the end of life, is one example of how the role of the primary care practitioner is being redefined and extended.

Other areas that Taylor and McPhee plan to target include:

- Developing and disseminating preventive care reminders for patients. This would include mailed, telephoned and automated voice-messaging outreach for patients. Current programs target healthy adults and patients with diabetes and HIV. An expanded program would target pediatric immunizations and spread general information beyond the UCSF Medical Center.
- Coordinating chronic pain management, including approaches to problems such as sickle cell disease, chronic pelvic pain, headache and substance abuse. Established groups from different schools, including the Pharmacy and Therapeutics Committees, the UCSF Pain Center and the Center for Symptom Management, would collaborate. Research would examine the primary care clinician's understanding of chronic pain and how to translate new knowledge to patient care.
- Develop a primary care curriculum — with faculty from all four schools — that would include a postgraduate program for primary care physician residents and nurse practitioners and pharmacy and dental graduate students.

The center is now compiling a roster of UCSF faculty and their research and teaching specialties, so others can match their interests and propose partnerships. The center has some funds to start new projects, according to the directors.

For more information, call the CCIPC at 476-4557.

Karen Preuss
Taylor

Karen Preuss
McPhee

Tom Wachs

## *Survivors Celebrate Life-Saving Transplant Program*

Hundreds of liver transplant survivors and their families recently joined together to celebrate the tenth anniversary of the world-renowned UCSF transplant program and to pay tribute to the people who gave them a new lease on life.

Andrew Yang, age 12, of San Jose, plays a musical tribute to the liver transplant team for saving the life of his father, Paul, who underwent a successful liver transplant operation at UCSF when Andrew was two years old. Andrew performed during the celebration on Sunday, February 8, at the Hilton Hotel, San Francisco Airport.

# MEDICAL CALL BOARD

## Muscle function study

Researchers in the department of radiology at UCSF are looking for healthy men and women between the ages of 65 and 85 to participate in a muscle function study at the VA Medical Center in San Francisco. If you are a non-smoker not currently exercising regularly and free from heart disease, high blood pressure, diabetes or other major illness, you may qualify. Volunteers will be reimbursed for their participation. Please call Hung Dao or Julie Doyle, 221-4810 x2454, Monday through Friday, 9 a.m.-5 p.m., for more information.

## Affects of alcohol use on lipoproteins

Researchers from the Cardiovascular Research Institute are studying how alcohol might influence the proteins in blood that carry cholesterol. There are two studies being conducted at the General Clinical Research Center, each calling for healthy, non-smoking men and women between the ages of 18 and 70. The first study requires one visit to the center, which includes an interview about dietary and alcohol intake and one blood draw. Results of total cholesterol, LDL and HDL cholesterol and triglyceride will be made available to participants. The second study (for ages 21 to 70) is a four-week study where all food is provided for four weeks in addition to white wine the last two weeks of the study. Blood is drawn three times throughout the study. Reimbursement for this study is $200.00. Call 476-7931 for more information.

## Men with hair loss needed

Men 21-45 years old are needed for a study to evaluate a new hair growth promoting product. They must be in good general health, and have dark hair that is thinning on top. The study will last for about nine months with eight visits during that time.

For more information, call 476-2572 or 476-3638 Monday through Friday, 8 a.m. to 4 p.m.

# UCSF nursing and medical schools ranked in *U.S. News & World Report*

By BILL GORDON

UCSF School of Medicine and School of Nursing have been named among the nation's best in the annual rankings of graduate schools published in the February 23 edition of *U.S. News & World Report*.

The School of Nursing ranked second among the nation's nursing schools, with top honors going to the University of Washington. The School received four number-one rankings in the seven nursing specialties rated by deans, faculty and administrators nationwide. The nursing school's clinical specialist, pediatrics, nurse practitioner/adult and nurse practitioner/family ranked first. Its geriatrics program ranked second and midwifery, fourth.

The School of Medicine tied for seventh — down from its fourth place ranking in last year's survey — but it was the only school to rank in the top ten in both the overall and primary care (4th place) categories. The overall top rank for medical schools went to Harvard University.

Medical schools were also ranked in eight specialties, and UCSF finished in the top 10 in seven of the categories. It ranked first in AIDS care, second in women's health, third in both internal medicine and drugs/alcohol, fourth in pediatrics, fifth in family medicine and 10th in geriatrics.

UCSF's graduate program in physical therapy, operated in cooperation with San Francisco State University, ranked 16th in the survey. The magazine this year did not rank dentistry or pharmacy programs, but its 1997 survey placed the UCSF School of Pharmacy at the top.

| The top medical schools ranking: | Top nursing schools ranking: |
|---|---|
| 1. Harvard | 1. University of Washington |
| 2. Johns Hopkins | 2. UCSF |
| 3. Washington University | 2. University of Pennsylvania |
| 4. Duke | 4. University of Michigan |
| 4. University of Pennsylvania | 5. Case Western Reserve University |
| 4. Yale | 6. Johns Hopkins University |
| 7. Columbia | 6. Oregon Health Sciences Center |
| 7. UCSF | 6. University of Illinois-Chicago |
| 9. Cornell | 6. University of Maryland-Baltimore |
| 9. Stanford | 6. University of North Carolina-Chapel Hill |
| 9. University of Michigan | |

# This surgeon is a stitch

By LESLIE LINGAAS

UCSF surgeon Robert Markison specializes in repairing damaged hands, especially the hard-used hands of creative people. Musicians and artists from around the world seek his help for treatment of problems that threaten their livelihood, such as repetitive strain injuries and carpal tunnel syndrome.

But Markison also celebrates the creative use of his own hands. Fueled by a resilient metabolism that functions on short blocks of sleep and by a "can do" attitude extraordinaire, he has tried his hand at a variety of creative pursuits, including designing and sewing his own wardrobe.

Of course, stitching is something that is familiar to all surgeons, but making clothing and footwear (yes, he cobbles his own shoes) allows Markison a creative freedom that one doesn't often find in the operating room. "Sewing is a safe, risk-free, no-liability, creative environment for a surgeon," Markison said.

And sewing, in Markison's case, does not mean occasionally knocking off a Simplicity pattern or two. On a recent meeting, his standard-issue surgeon's white coat covered several garments of his own manufacture and design: a button-down oxford cloth shirt in pale lavender, a hunter green pair of wool gabardine double-pleated pants, a hand-painted silk tie depicting a pair of toucans in the rainforest, and handmade leather shoes. In his back pocket was a wallet fashioned in purple leather left over from a previous cobbling project. A grey wool beret that he had also made reposed on a nearby desk.

As any serious seamstress knows, one of the pleasures of making your own clothes is getting a perfect fit, and the most efficient way to obtain that fit is to work on a custom form. Markison has had his feet cast in plaster so that he has a model on which to design his shoe patterns. He fits his clothing on a two-part body form, which was created for him by a woman in Tracy, California. Having these forms made is not a procedure for the claustrophobic. Decked out in a Speedo suit, he submitted to having his body swathed in plastic wrap, after which he was slathered with plaster from jaw to shin. When dry, the plaster slabs were removed and used to cast a foam, fabric-covered form that exactly replicates his body contour.

Markison

Markison's foam body-double resides in the San Francisco home he shares with his wife and three young daughters, where a shirt, pair of trousers, or jacket can be stitched in a few free hours. Often Markison will find time for his sewing in the middle of the night, sleeping for three hours, sewing for three hours and then snatching another few hours of sleep before dawn. His sewing equipment includes a top-of-the-line programmable sewing machine, a 7' cutting board, a five-thread serger (for finishing raw edges), an industrial blind stitcher for hemming, and a professional-quality press.

Markison credits his mother with igniting his interest in making clothing. She was an accomplished seamstress and also a goldsmith and lapidarian (one who works with precious stones). Markison also makes jewelry, including cufflinks, pewter-cast buttons and bolo ties.

Markison's professional offices on Van Ness Avenue are what you would expect from an prominent hand surgeon, except for the room in the back that serves as his cobbling workshop. Surrounded by the arcane tools of an old-fashioned shoemaker, Markison can come in early or stay late to knock off a pair of dress shoes, or something a bit more informal. One of his works in progress is a casual lace-up shoe made in tapestry remnants from his most recent do-it-yourself home upholstering project. Markison plans next to make a replacement of one his favorite creations, a leather oxford with a cutwork treble clef pattern in the toe piece.

There are philosophical underpinnings to Markison's handmade wardrobe. He laments the fact that we live in a culture that promotes "passive dependent consumerism." But perhaps a larger motivation is the creative pleasure he finds in this hobby.

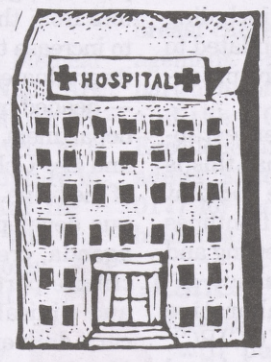
Sewing and related pursuits, however, are not his only creative outlet. Markison is also an accomplished musician and plays professionally around the Bay Area. He started out on recorder and clarinet, and has added saxophone and keyboards. He is also an artist, specializing in medical illustration, wildlife painting and portraiture.

His knowledge of the creative arts adds an extra dimension to his ability to heal. Markison can suggest to a tailor, for example, that using a rotary cutter instead of scissors will spare the tendons in his arm, or encourage a pianist to spend some time at the keyboard in a standing position. Markison has also worked with a number of premier instrument makers to redesign such instruments as the viola and flute to make them ergonomically more sound and less likely to cause repetitive stress injuries.

Even his tailoring interests have yielded "bench to bedside" benefits. Markison maintains that sewing clothing has given him several ideas that have resulted in published papers on improved surgical techniques for repair of traumatic injuries.

## AIDS Program at SFGH Honored with "Humanitarian Award"

The UCSF AIDS Program at San Francisco General Hospital has received this year's top honor of the Desert AIDS Project of Palm Springs, Calif. The Project's prestigious 1998 Steve Chase Humanitarian Award in Science and Medicine was presented at a ceremony in mid-February in Palm Springs.




The honor cited the AIDS Program for its "unique blending of patient care, teaching, and research that serves as a worldwide model." The program's clinical services include Ward 5A, the inpatient HIV/AIDS unit, and Ward 86, the outpatient clinic.

Both clinical units receive strong volunteer support, which has been ongoing since their inception.

In presenting the award, Warner Engdahl, president of the Board of Directors of the Desert AIDS Project, noted that the Program at SFGH when it was established in 1983 was one of the few places in the country where patients with HIV disease could receive "knowledgeable and compassionate care."

The humanitarian award is named for Steve Chase, an internationally recognized designer who died in 1994. Chase was active in the Palm Springs community and was a key supporter of the Desert AIDS Project.

The UCSF AIDS Program at SFGH has provided treatment to thousands of patients. For the past seven years, the Program has been named as the best in the country for AIDS care in the annual survey conducted by *U.S. News & World Report*.

## Therapy (from page 3)

some preparation methods to support subsequent industrial-scale production, which is required for any future clinical trials. This assistance will be provided by the NCI Monoclonal Antibody and Recombinant Protein (MARP) production facility in Frederick, Maryland.

In addition to Park, the UCSF research team includes Christopher Benz, UCSF professor in residence and principal investigator of this SPORE project; Demetrios Papahadjopoulos, professor emeritus of cellular and molecular pharmacology and a pioneer in liposome research; Keelung Hong, associate scientist of cellular and molecular pharmacology; and Dmitri Kirpotin, associate scientist of cellular and molecular pharmacology.

UCSF'S ELECTRONIC DAILY
DAYBREAK
FOR DAILY NEWS GO TO www.ucsf.edu/daybreak/

## Low-income women who receive support have better birth outcomes

By LORDELYN P. DEL ROSARIO

Low-income pregnant women should receive adequate prenatal support services — at least one nutrition, health education and psychosocial service each trimester they are in care — to increase their chances of having a healthy birth, according to an analysis by health policy experts at UCSF.

"The odds of a good birth outcome were three times as high if women received these support services each trimester in care, whether they were in care for one, two, or all three trimesters," said Carol C. Korenbrot, associate professor, UCSF Institute for Health Policy Studies.

"Through these services, low-income women may reduce their health or social problems, gain access to needed food, housing, legal or other resources that help them comply better with medical treatments and avoid preventable complications of pregnancy," she added.

Korenbrot is the lead author of the analysis, Explaining Variation in Birth Outcomes of Medicaid-Eligible Women with Variation in the Adequacy of Prenatal Support Services, published in the February issue of Medical Care.

Korenbrot and research colleagues conducted a year-long study to determine whether there was an association between provider compliance to prenatal care guidelines and good, less costly birth outcomes. In this study, researchers defined good birth outcomes as birth weight higher than 2500 grams and full term births.

Based on recommendations by the Public Health Service and the National Institutes of Health, the Comprehensive Perinatal Services Program (CPSP) established regulations that women receiving Medi-Cal — Medicaid in California — should receive health education and nutrition assessments every trimester they are in care. In addition, they should receive psychosocial services, which include both psychological and social services.

In the study, researchers examined 3,485 medical records from a random sample of 27 CPSP-certified public hospital clinics, health department clinics, community clinics, private hospital clinics, and physician offices that provided care to at least 50 pregnant Medi-Cal eligible women a year.

Findings indicated that low-income women whose needs for psychological support, nutrition or health information are addressed at least each trimester while they are in care, have better odds of a good birth outcome than a woman who does not receive these services.

To decrease poor birth outcomes, not only do adequate services need to be provided, but study findings also indicate the need for effective support services for low income pregnant women, according to the UCSF researchers.

"Health plans serving this population, such as Medicaid, should assess whether health care providers adhere to prenatal guidelines for these support services," Korenbrot said. "These plans should consider incentives to provide services associated with better birth outcomes."

Finally, providers should evaluate the quality of service to improve the delivery of these services, the researchers said.

## Spinal Cord (from page 1)

hibitors," Tessier-Lavigne said.

The hard-wired scaffolding of the nervous system is laid down in the embryo, and in each organism generates a distinctive nerve-network architecture. In animals with brains, and even in simpler creatures, life experiences add a filigree of new nerve connections to this scaffolding. But many organisms seem to lack the ability to re-form these most basic connections if they are lost due to injury of the brain or spinal cord.

Despite their anatomical differences, organisms share a need to receive and relay sensory information from all sides and to move in response to this information. These movements must be coordinated by motor nerves on both sides of the body. To enact these responses, nerves must be able to relay signals from one side of the body to the other side.

The family of genes now reported by the HHMI research collaborators helps accomplish this wiring task in the embryonic nervous system. The genes are named *roundabout* genes (or *robo* for short) based on the behavior of growing nerve filaments, called axons, in mutant fruit flies discovered about five years ago in the laboratory of Corey Goodman, an HHMI investigator and professor of neurobiology and genetics at UC Berkeley, and the senior author on two of the newly published studies.

"A decade ago we knew very little about molecules guiding nerve-cell growth," Goodman said. "Just within the last five or six years there has been tremendous progress, but we are still far from understanding the complete set of molecules that are involved in wiring the brain and nervous system and how they work together. We would like to understand not only the molecules involved, but also the logic of how connectivity is encoded."

# Medicine is a field of dreams for two teams of UCSF physicians

By SARAH ELLIOTT

The adage, "If you build it, they will come" applies in the medical field as well as on the baseball field, according to Jeffrey A. Golden, UCSF professor of clinical medicine.

Two years ago, Golden teamed with the Interventional Radiology group headed by Roy Gordon, professor of radiology at UCSF, to begin implanting expandable metallic stents in lung transplant patients.

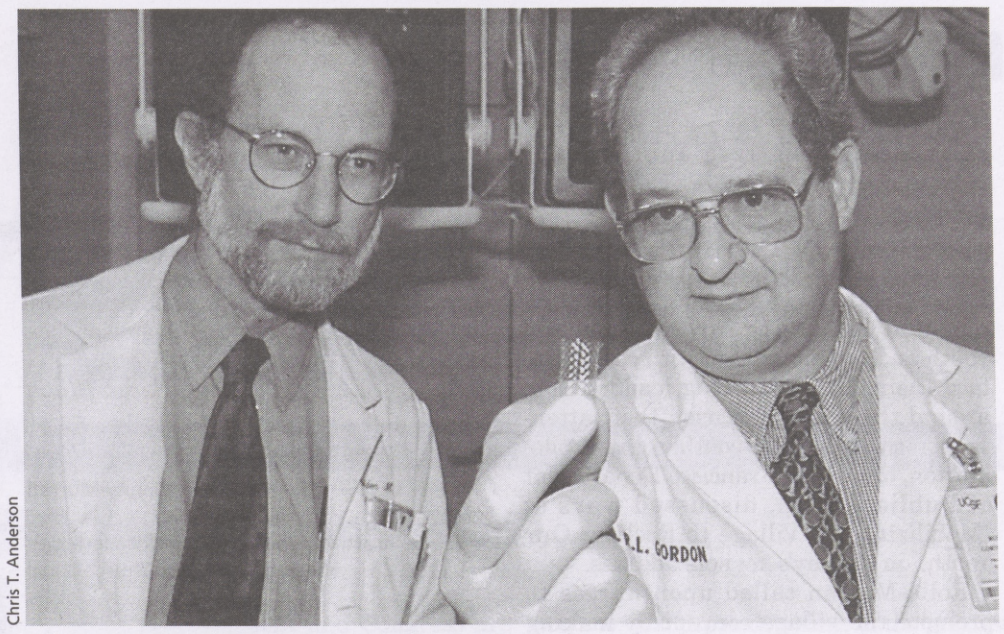
Interventional radiologists were experienced in the placement of these stents — a device used to provide support to tubular structures — in narrowed arteries and bile ducts and thus were the natural partners to join with Golden in treating narrowed airways. "We are applying technology from one organ system and adapting it to the tubes of another organ and realizing that, in effect, a tube is a tube," Golden said.

Satisfied with the results they had stenting transplant patients, the physician team entered into non-transplant situations, "in certain highly selective lung cancer patients" where stents keep an area of untreatable cancer from blocking the airway. "We don't do this if there is otherwise substantial cancer that is clearly going to shorten a patient's life," Golden said. "Where it appears that blockage of the airway is the main problem in that cancer patient, we are very eager to do this procedure."

When word of their novel procedure reached beyond the walls of the UCSF Medical Center, part of UCSF Stanford Health Care, there was a stream of queries from physicians and potential patients. "I never had a referral two years ago for a stent, and now every week someone is calling me," Golden said. "Community physicians in the pulmonary world are always interested in new modalities. Once people hear that we are doing something new like this, they start sending us patients."

Golden, who with Fraser Keith, director of the UCSF Cardiac Transplant program, established UCSF's lung transplant program in 1990, said it was a dire situation that forced him and Gordon to consider the stent.

"The way we got into it was really as an emergency," Golden recalls. "About 20 percent of transplant patients develop a narrowing at the site where the donor and recipient airways are sewn together." This site, called the anastomosis, is susceptible to softening and collapsing on exhalation, according to Golden.



Chris T. Anderson

Golden and Gordon display their miracle modality — the stent.

"In lung transplant, you don't transplant an artery to that region, so the anastomosis can suffer from lack of arterial supply and wither," Golden said. "We had to do something for these patients, and that's why we started stenting."

Gordon describes a stent as an elastic flexible tube formed from a criss-cross mesh of wires that can be inserted in a collapsed state and then placed accurately in the narrowed airway using both bronchoscopic and x-ray guidance. Once in place, the stent is released and springs open, keeping the airway itself open.

"These stents have a memory, so to speak," Golden explained. "You can compress them to a narrow size to facilitate placement in airways, and when released, they return to their large size and are held in place."

It appears that the lining cells of the airway grow over the stent wires and so the stent is incorporated into the wall of the airway. This allows the sweeping cilial action of these lining cells to continue uninterrupted.

"We provide the airway with a supporting internal skeleton," Gordon said. "The success of the technique depends on the combined skills of the bronchoscopist and the interventional radiologist."

Golden and Gordon are currently authoring an article detailing the efficacy of the various stents they have tested. "In the beginning we were having trouble finding the appropriate size, but now companies are coming out with all dimensions," Golden said. "It is a very fast-moving field, and the stent manufacturers are producing new sizes and types of stents all the time."

Recently, they have begun to stent patients with benign problems, where they need to ensure that the technology, which is potentially going to be in place for many years, is not going to deteriorate down the road. "In some cases we have taken them out, but that is not the plan," Golden said. "It is a permanent prosthesis."

Because this is a new technique, long-term risk is a relative unknown. But the patients and the doctors are confident with the outlook. "We will not do this unless there is clear dramatic benefit," Golden said.

They are also expanding into other types of benign problems in the trachea and close to the vocal chords, "with a recent, very dramatic success," Golden said. All four UCSF interventional radiologists — Gordon, Robert Kerlan, Jeanne La Berge and Mark Wilson — are now skilled in the placement of airway stents so that stenting can be done at a moment's notice. "This is a growing sub-specialty of interventional pulmonary medicine."

At the urging of the mother of one of Golden's kidney transplant patients, who has ties to Shanghai, Golden visited the Shanghai Chest Hospital late last year, where he reviewed his stent experience and bronchoscoped several of their patients.

Golden and Gordon are returning to San Francisco's sister city this year to stent those, and other, patients and instruct Shanghai physicians in the procedure. Keith will be joining them to aid the hospital in developing their lung transplant program.

> **"The program has succeeded because, as is often the case at UCSF, people from two different specialties are working together."**
>
> – JEFFREY GOLDEN

"This is a country with a tremendous amount of tuberculosis, which can cause narrowing of the major arteries and lung cancer, so they have asked us to teach the chest physicians how to place these stents," Gordon said. "The doctors in Shanghai read our publications and are generally well trained, so they are keen to have the opportunity to learn the new modalities like stenting."

Golden contributes their achievement to the fact that the climate at UCSF is conducive to collaboration. "The program has succeeded because, as is often the case at UCSF, people from two different specialties are working together," Golden said. "Which is why I think UCSF is a successful place, at a clinical, basic science level."

As they continue to search for new designs and new placements, they discover more about adapting techniques from arteries and bile ducts to the airways, Golden said. "I don't know where this is going to lead because we are already using it in places that I never dreamed we would be able to use it."

# CAMPUS BRIEFS

## Research Funds

The UC Linguistic Minority Research Institute (LMRI) offers grants to UC faculty members and doctoral candidates for research that leads to a better understanding of how to improve the academic achievement of language minority youth. Research areas may include the social context of schooling language minority youth, such as health and medical factors affecting educational outcomes among language minority students, and ethnic conflict and violence in the school environment; policy studies on issues that affect language minority students; acquisition of language, literacy and cognitive skills; and strategies for improving instructional outcomes of language minority students. Small grants for faculty and research staff members are available from $5,000 to $15,000 for up to one year. Dissertation research grants are available for up to $7,500 for one year. The deadline for all proposals is April 30. Contact the LMRI for applications and information. Tel: 805/893-2250. E-mail: lmri@ omrinet.ucsb.edu. Fax: 805/893-8673. Web: http://lmrinet.ucsb.edu.

UC MEXUS seeks grant proposals from UC faculty members and doctoral students for collaborative projects between UC and Mexican scholars, and for research on Chicano populations and/or Mexico-related issues. Faculty grants of up to $10,000 for one year, and dissertation grants of up to $5,000 for two years are offered. Faculty proposals are due April 6, 1998. Student proposals are due April 17, 1998. A new grant of up to $15,000 for two years is offered for collaborative research in the sciences and humanities involving UC principal investigators and researchers at Mexican institutions; the proposal deadline for the UC MEXUS-CONACYT Grants for Collaborative Projects is April 6. UC Mexus also offers small grants of up to $1,000 for special one-time, short-term needs; proposal deadlines are February 27, July 1 and October 30. For information contact Kathryn Vincent at 909/787-3519 or kathryn. vincent@ucr.edu.

The UCSF Center for Aging in Diverse Communities (CADC) is requesting applications for pilot studies to investigate issues of health and aging in African-American and Latino populations. CADC has a total of $40,000 to fund two to four pilot studies for the coming year starting in July. The pilot study must be led or co-led by an individual at the junior faculty level (i.e., assistant professor or less) or by a postdoctoral fellow or graduate students advanced to candidacy for a doctoral degree. Faculty or postdoctoral fellows in medicine, nursing, public health, social sciences, or any health-related disciplines are eligible. African-Americans, Latinos, Asians, American Indians and other minority investigators are invited to apply. Two to four pilot studies are expected to be funded in each of years 2 to 5 of the CADC (1998-2002).

Completed application should be received by April 20. Funding decisions will be made by May 18. The pilot studies will be funded for an amount not to exceed $20,000 per study to be carried out within a one-year period beginning July 1.

For general information, questions regarding the application process of this RFA, please contact: Sylvia Correro, program coordinator at 476-9933 or email sylvia_correro@ucsfdgim.ucsf.edu.

## *New emergency number*

For all emergencies: police, fire, medical and hazardous materials, dial 9+911 from all locations utilizing the campus phone system. For staff reporting Code Blue (cardiac arrest) emergencies, in designated Code Blue buildings only:

Parnassus: call 6-1234 (no change)
Mount Zion: call 5-1234 (replaces "83")

As a safety measure during the educational campaign, the old phone numbers will continue to work for a limited time. By utilizing the new 9+911 number, the public safety dispatchers will be able to determine the location of the caller, including the building, address, room and telephone numbers.

Non-emergency police service is still available at 6-1414, or if off campus, 476-1414. If you have any questions about 9+911, please contact the communications supervisor at 476-0620. If you have questions about Code Blue, please call Cindy Lima at 476-4855.

## Founders Day (from page 1)

Temple Emanu-El, King formed a unique partnership to build bridges of opportunity for the city's K-12 students through after-school tutoring. This program has become a model that now offers hands-on learning in computers, chess and leadership skills. With King's dedication and commitment, this program has been a success.

Lawrence Brown, mail services processor, receives the Chancellor's Award for Public Service for his 10-year commitment to helping men and women living with HIV/AIDS in the East Bay. In every aspect of volunteer activity, from stuffing envelopes to developing and training support group leaders, he has demonstrated quiet, committed and devoted leadership. As the 1988 initiator of the first African-American Men's support group in the East Bay (Men Living with AIDS and HIV), he made sure that a previously overlooked group found a home and a caring audience. His countless hours in small group work and his training of others have helped many men and women find strength in their lives.

Tom Wachs

Brown

Described as "the model volunteer," he has responded compassionately to all situations, given of himself freely, and worked to build just, responsible and understanding communities wherever he has gone.

In addition to the public service awards, the luncheon will honor the recipients of the following awards:

The Chancellor's Award for Exceptional University Service; The Distinguished Nurse Award; The Helen Ripple Award; The Jeanne M. Yalon Memorial Award; and The UCSF/Mount Zion Milton and Helen Pearl Award.

Refer to Newsbreak calendar for other events.

# UCSF School of Nursing hosts Black Nurses' Symposium

"Our Future: The Promise of Youth" was the theme of the 12th annual Black Nurses' Symposium at UCSF's Cole Hall, February 20.

Sponsored by the UCSF School of Nursing, this day-long symposium featured speakers and panel discussions aimed at reclaiming African-American youth and instilling them with courage to face their future. Nursing leaders from around the country focused their attention on the subject of youth. Agnes Rolle-Morton, of the San Francisco Department of Public Health, discussed ways of "Mobilizing the Village to Reclaim Our Youth," in the day's keynote address.

Rolle-Morton called upon nurses to promote the village concept by making personal connections with youth in their communities.

"Volunteer to teach, help one child learn to read," pleaded Rolle-Morton. "We really have to be about the business of getting our kids on target."

Nanny Murrell, associate professor in the Community Health Department in the School of Nursing at the University of Texas and former UCSF School of Nursing faculty member, spoke on "Courage: What Our Youth Must Have." In addition, an afternoon session provided information on primary health care issues for youth as well as a social and cultural perspective.

Now in its 12th year, the Black Nurses Symposium aims to raise serious issues for African-American nursing leaders and to encourage more African-Americans to pursue careers in nursing.

"We need to see people in the [medical field] that look like us, and we don't need to apologize for that," said Rolle-Morton. "What kind of pipeline do we need to create to get our young people interested in nursing?"

With that goal in mind, the symposium included an afternoon nursing education workshop designed to give nurses interested in pursuing higher education strategies for negotiating the educational system.

*— Dale Martin and Sarah Elliott*

Top: Nanny Murrell

Bottom: Children from the Harmony Missionary Baptist Church choir

Tom Wachs

Tom Wachs

## Gerberding (from page 1)

which other hospitals shape their PEP programs.

"Initially, I think we were focusing on providing drug treatment and testing, but it became clear very soon after we initiated it that the major benefit from the hotline was probably the immediate triage and counseling," Gerberding said of the Needlestick Hotline. "The reporting of injuries almost doubled after we implemented the hotline." Soon after SFGH launched its hotline, it was made available to all health department workers. UCSF then initiated hotlines for its employees on Parnassus Heights and at the Veterans Affairs Medical Center. "I think UCSF was probably the first large medical institution to have hotlines for all of its affiliated hospitals," Gerberding said.

The system for workers at SFGH who fear they've been exposed to HIV is to call the Needlestick Hotline for initial advice and, if they need to start drugs to prevent HIV infection, go to the pharmacy and get a starter packet after a clinician approves it. "There's no questions asked, no need to provide their name or any other information — it's simply released anonymously by the pharmacy," Gerberding explained. Then they need to follow up in employee health services the next working day to have a face-to-face discussion about whether they should continue the drugs. An examination and blood test are also administered. "The thing that we try to initiate on the hotline is the counseling," Gerberding said. "Sometimes that's mostly what people need."

In the last ten years, the PEP drug treatment advice has changed significantly. Because of the varied combinations of antiretroviral drugs now being taken by people with HIV disease and the emergence of drug resistance, a high level of knowledge is required of the hotline workers.

"Now we're using very complicated drug regimens that are kind of tailor-made to the individual characteristics of each exposure," Gerberding said. "It's not like AZT where you have to know one drug. Now you have to know all 11 and all the complexities of how to prescribe them, how to monitor them, how to properly dose them and what the drug-drug interactions are."

In response to this higher degree of complexity, the national PEPLine was created, which is staffed by expert clinicians at SFGH who give out advice to clinicians around the US who manage difficult occupational exposures.

The project is a collaboration between the Needlestick Hotline and the National HIV Telephone Consultation Service or "Warm Line," which is run by Ron Goldschmidt, professor of family and community medicine and funded by Health Resources and Services Administration (HERSA).

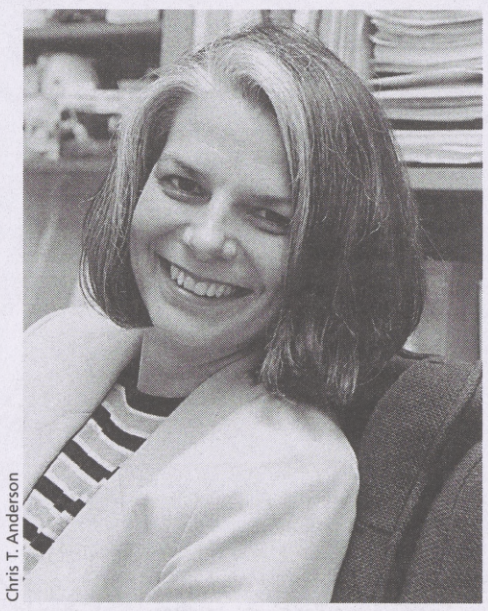
Although PEP is effective in reducing HIV infection, efforts to prevent needlesticks and other occupational exposures to infections can be improved, Gerberding said. "There are still some worrisome areas," she said. "One area is the operating room where needles and sharps have to be used. There are a lot of people in a crowded space and it could be a very dangerous situation if there's not a lot of attention paid to safety. We have maybe some of the riskiest patients in the United States but we have some of the safest operating rooms in the United States." Emergency rooms, with their crowded quarters and chaotic pace, are the other area where needlesticks happen most often, Gerberding said.

**"The thing that we try to initiate on the hotline is the counseling… Sometimes that's mostly what people need."**

— JULIE GERBERDING

"We've gone from a phase where we really looked at needle disposal issues and probably eliminated 30 percent of the problem right off the bat by dealing with that," said Gerberding of early prevention efforts. "We probably affected another 20 percent of the problem by implementing sharps safety programs and purchasing devices that are designed to be safe. The remaining problem is very difficult to address. Many of the injuries you see now are caused when people are using the sharp for the intended purpose. While they are sticking the patient for blood, for example, the patient moves and they get stuck, or while they are starting the IV, the patient has a seizure and they get stuck."

Up to four workers affiliated with SFGH have been infected with HIV through needlestick exposures, Gerberding said. But SFGH and UCSF have gone to great lengths to ensure that its students and clinicians are as knowledgeable as possible of safety precautions.



Chris T. Anderson

"We're one of the few, if not the only, universities that have a mandated hands-on, all-day training for students in the new safety products we have so they're not confused by some newfangled device," Gerberding said.

In the clinical setting, health care workers at SFGH use body substance precautions — which are more far-reaching than universal precautions — such as double-gloving or wearing face masks or protective garments when needed.

"Any body fluid that may harbor a germ of any kind we take seriously, not just those from patients we know to be infected," Gerberding said.

Although the risk of contracting HIV from skin or mucous membrane exposure is very low, the risk of becoming infected with other infectious diseases, such as Hepatitis B and C, is very real, Gerberding said.

"In this hospital the biggest hazard to workers is not HIV infection — it's Hepatitis C infection," she said. "Thirty-three percent of our adult patients who've been sources of needle injuries have Hepatitis C and it's transmitted about ten times more readily than HIV and there's no prophylaxis for it."

On the flip side of prevention is protecting patients from contracting diseases from health care workers. Although the risk of doctors transmitting HIV to patients is, according to Gerberding, "infinitesimally small," there is a subset of certain surgical and dental pervasive procedures where there is a potential risk.

For HIV-positive health care workers who are concerned that they might expose a patient to HIV, a UCSF advisory group, chaired by Joel Palefsky, associate professor in residence, has devised a support system.

"It's a completely voluntary system for students, faculty and staff to contact qualified experts who can help them evaluate their risk, evaluate their career pathways, and get a supportive kind of interaction …," Gerberding explained. "The hope is that it will be a safe place for people who want help to go without fear that they'll lose their job or their education."

For information on the web, link to The Epidemiology and Prevention Interventions Center site at http://epicenter.ucsf.edu/.

The PEPLine may be reached at 1-888-HIV-4911; The Warm Line at 1-800-933-3413